AD-A072 071

NEW YORK UNIV N Y SCHOOL OF MEDICINE CLASSES AND PROPERTIES OF HUMAN ANTIBODIES.(U) JUL 75 B B LEVINE

F/G 6/5

DAMD17-74-C-4070 NL

UNCLASSIFIED











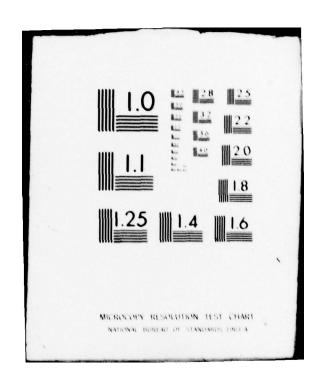








DATE FILMED 9-79



LEVEL



CLASSES AND PROPERTIES OF HUMAN ANTIBODIES

Annual Report, Jun 74-Jul 75) (

July 1975

(12) 18p. /

bу

Bernard B. Levine, M. D.

DDC DECEMBER JUL 30 1979

Supported by

US Army Medical Research and Development Command Fort Detrick, Frederick, Maryland 21701

Contract No. / DAMD 17-74-C-4070

17-74-C-4070 (16) 3A 161102871Q

New York University School of Medicine New York, New York 10016

Approved for public release; distribution unlimited

The findings in this report are not to be construed as an official Department of the Army position unless so designated by other authorized documents.

79 07 30 021

257 400

COC FILE COPY

SECURITY CLASSIFICATION OF THIS PAGE (When Data Entered)	
REPORT DOCUMENTATION PAGE	READ INSTRUCTIONS BEFORE COMPLETING FORM
1. REPORT NUMBER 2. GOVT ACCESSION NO.	3. RECIPIENT'S CATALOG NUMBER
4. TITLE (and Subtitle) Classes and Properties of Human Antibodies A072072	5. Type of REPORT & PERIOD COVERED Annual Report June 1974 - July 1975 6. PERFORMING ORG. REPORT NUMBER
7. Author(s) Bernard B. Levine, M. D.	DAMD 17-74-C-4070
9. PERFORMING ORGANIZATION NAME AND ADDRESS New York University School of Medicine New York, New York 10016	10. PROGRAM ELEMENT, PROJECT, TASK AREA & WORK UNIT NUMBERS 61102A 3A161102B71Q.00.143
11. CONTROLLING OFFICE NAME AND ADDRESS US Army Medical Research and Development Command	12. REPORT DATE July 1975
Fort Detrick, Frederick, Maryland 21701	13. NUMBER OF PAGES 8 pages
14. MONITORING AGENCY NAME & ADDRESS(If different from Controlling Office)	15. SECURITY CLASS. (of this report) Unclassified 15a. DECLASSIFICATION/DOWNGRADING SCHEDULE
16. DISTRIBUTION STATEMENT (of this Report)	

Approved for public release; distribution unlimited.

17. DISTRIBUTION STATEMENT (of the ebetract entered in Block 20, if different from Report)

18. SUPPLEMENTARY NOTES

19. KEY WORDS (Continue on reverse side if necessary and identify by block number)

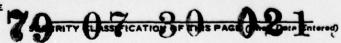
Allergy; IgE; Atopy; Hyposensitization

microgram

20. ABSTRACT (Continue on reverse side If necessary and identity by block number)

Multiple injections of ovomucoid were given to mice with ongoing prolonged IgE antibody production to that antigen. Two inbred strains and antigen doses ranging from 0.05 to 5 µg each injection, given intradermally and subcutaneously were used. Mice treated in this manner showed a marked diminution of the IgE antibody booster response as compared to controls. This decrease in booster response was antigen-specific. In addition, a protective effect from anaphylaxis was indicated. The mouse model continues to be a valuable tool for studies of certain IgE-mediated diseases.

DD , FORM 1473 EDITION OF 1 NOV 65 IS OBSOLETE



CLASSES AND PROPERTIES OF HUMAN ANTIBODIES

Bernard B. Levine, M.D.

Progress has been made on our studies on "hyposensitization" of mice with prolonged reagin production. We have published on the development of a mouse model for reagin hypersensitivity in man. The method consists of immunization with minute doses of protein in aluminum hydroxide gel. Crucial is a combination of antigen, dose and genetic strain of mouse. Thus both LAF1 and B6D2F1 hybrid mice develop prolonged reaginic antibody production after 2 injections of 0.2 μ g ovomucoid 35 days apart. For LAF1 mice serum reagin antibody is detected in the serum for the life of the animal. Also, in all ways tested to date, reagin production in the mouse model is similar to reagin production in spontaneously (by aeroallergens) sensitized man. Reaginic antibody in the mouse appears to be IgE-like.

The present work was done to study the effect of repeated injections of antigen in these sensitized mice upon reagin and IgG₁ antibody. The experiments were designed to mimic the "hyposensitization" therapy given human beings with IgE-mediated atopic diseases, as far as was possible.

Female mice, 9-11 weeks old, of the LAF1 and $B_6D_2F_1$ strains were immunized with two intraperitoneal injections (35 days apart) of 0.2 μg purified ovomucoid plus 0.2 μg antigen E (from ragweed pollen extract) mixed with 0.5 ml PBS containing 2 mg of aluminum hydroxide gel. Sera were drawn at intervals and assayed for IgE (reagin) and IgG1 antibodies by PCA in CFW female mice using 72 hour and 2 hour sensitization periods respectively. For IgE antibodies to ovomucoid either 150 μg or 1.5 μg of protein was used for elicitation. The lower dose gives titers two tubes (or greater) lower than the higher dose. The lower titers appear to represent the antibodies of relatively higher antigen binding avidities operationally, as they apparently capture antigen at lower concentrations. IgE antibodies specific for antigen E were assayed by using 6,000 PNU fresh short ragweed extract (reconstituted from lyphylized ragweed).

Antiovomucoid IgE antibodies were followed till the titers plateaued. One week after the second immunization (6th week of experiment) titers were 1/1280 to 1/640, and plateaued at 1:80 at the 20-30th week (for LAF1). "Hyposensitization" injections were begun on the 31st week and continued to the 62nd week. Mice were divided into 5 groups of 6, a control (not injected) group and 4 injected groups. Injections were three times a week to reach a maximum on the 6th injection, then weekly for 4 weeks, then twice at maximum dosage a week for the remainder of the 31 weeks of injections. Maximum dosage was 0.5 or 5.0 μ g subcut., or 0.05 or 0.5 μ g I.D. Bloods were taken at intervals and assayed for antibodies. All animals were boosted (as in the two immunization injections) on the 73rd and again on the 84th week, 12 and 23 weeks after the "hyposensitization" series had ended. Sera were drawn after these boosts and assayed for IgG1 and IgE antibodies.

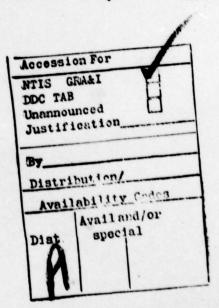
The data are shown in Tables 1 and 2. The "hyposensitization series" of antigen injections resulted in a sharp booster of serum IgE and IgG1 antibodies

to ovomucoid. As the antigen injections continued, titers of both IgG1 and IgE antibodies fell. In the LAF1 mice, titers of IgE antibodies appeared to fall more rapidly than did the titers of IgG1 antibodies; in the B6D2F1 mice the distinction was not as clear. At the end of the 31 weeks of hyposensitization, IgE antibodies titers were low (1:20 to 1:80) but significantly higher for the "hyposensitized" groups than for the control groups. However, a booster intraperitoneal injection of ovomucoid (9 or 11 weeks after the end of the course of hyposensitization) resulted in a sharp rise of IgE antibodies in the control groups, while it caused either no (or a much lower) rise in IgE antibodies in the "hyposensitized" groups. Similar booster effects were noted for IgE antibodies. Thus after the booster injection (week 73 or 75) titers of IgE antibody specific for ovomucoid were significantly higher in the control groups, than in the "hyposensitized" groups. Eleven weeks after, another booster injection was given the control and "hyposensitized" groups with similar results. At the end of this experiment (week 85 or 87), titers of IgE antibody specific for ovomucoid were considerably higher for the control than for the hyposensitized groups. These differences were specific; there were no clear differences between control and hyposensitized groups in antibodies specific for ragweed extract (antigen E).

Three weeks after the 2nd booster injection (weeks 87 or 89) the mice were injected with 10 μg ovormucoid to determine whether the "hyposensitized" groups had been protected against anaphylaxis. The 10 μg dose was used as in a preliminary experiment on 2 controls, 1 μg i.v. did not cause death. These two mice were not used in subsequent experiments. Table III shows that mice in the "hyposensitized" groups were less frequently killed by anaphylaxis than were mice in the control groups.

These data are similar to those obtained in studies on the immunological changes to "hyposensitization" injections in humans with ragweed hay fever. It provides increasing support for our notion that this is a useful experimental animal model for IgE-mediated allergic diseases in man.

We plan to continue with experiments to elucidate immunological mechanisms underlying these observations, and to test different therapies in this model.



 ${\tt IgG}_1$ and ${\tt IgE}$ antibody titers in "hyposensitized" and control ${\tt IAF}_1$ mice TABLE I:

	IgE Rag- weed						< 1:20	1:5		1:5		1:260	07:1	1:40	tine and	1:40
Group IV	LgG IgE IgE No- coo- Rag- nucoid mucoid weed	1:640	1:320	1:640	1:160	1:160	1:40 < 1	1:80	1:80	1:80		1:320	1:40 1	1:160		
Gro	1gG ovo- mucoid	1:2560 1:640	1:1280	1:320	1:320	1:160	1:160	1:320		1:320		1:480	1:640	1:640		1:1280 1:80
	IgE Rag- weed	•	•	•	,	•	< 1:20	< 1:5		1:5		1:90	1:40	1:40		1:80
Group III	LgG LgE LgE sve. Noo- Rag- nucoid mucoid weed	1:2560	1:1280	1:640	1:160	1:160	1:80	1:80	1:80	1:80		1:173	1:80	1:160		1:80
Grou	IgG ovo-	1:2560	1:1280	1:1280	1:640	1:640	1:640	1:320		1:320		1:1280	1:1280	1:640		1:1280
	IgE Rag- weed	•	•	•	•	•	< 1:20	1:5		< 1:5		1:290	1:80	1:40		1:80
Group II	BG IgE IgE vo-	1:320	1:320	1:320	1:160	1:160	1:160 < 1:20	1:80	1:80	1:20		1:80	1:40	1:40		1:80
ĕI,	IgG ovo-	1:2560	1:1280	1:640	1:1280	1:1280	1:1280	1:640		1:160		1:213	1:640	1:640		1:1280
	IgE Rag- weed		•	•	•	•	< 1:20	< 1:5		< 1:5		1:320	1:160	1:80		1:320
Group I	gG 1gE 1gE vo- vo- vo- Rag- ucoid mucoid weed	1:5120 1:2560	1:1280 1:1280	1:640	1:320	1:320	1:80	1:80	1:80	1:80		1:80	1:80	1:40		1:80
91	IgG ovo- mucoid	1:5120	1:1280	1:1280	1:1280	1:1280	1:1280	1:1280		1:1280		1:520	1:640	1:1280		1:1280 1:80
~ el	IgE IgEC ovo- dRag-d mucoid weed		•		•	•	1:80	1:20		1:5	ation	1:1930 1:50	1:640 1:40	1:640 1:40	zation	1:2560 1:40
Control Group	IgE ovo-	1:80	1:80	1:80	1:80	1:80	1:80	1:20	1:20	1:20	Third Immunization	1:193	1:640	1:640	Fourth Immunization	1:256
	IgG c 1 ovo mucoid m	1:80	1:80	1:20	< 1:20	1:5	1:5	1:5		< 1:5	Third	1:80	1:160	1:160	Fourth	1:640
Experi- ment		33	35	39	45	64	23	27	62	02	73	74	8/	28	28	85

a- Hyposensitization with ovomucoid began at 31st week of experiment - with 5 increments of dosage over a 9 day period - then the maximum dose weekly for four weeks then - given twice weekly until the 62nd week of the experiment.

b- Groups of 7-8 mice each were made from a population whose pooled sera IgG and IgE antibody titers were 1:80 and 1:160 for ovomucoid, and 1:80 for Ragweed at week 27 of experiment.

c- IgG and IgE titers were obtained by PCA assay in 6-8 week old CFW female mice, IgG, 2 hour sensitization period; IgE 72 hour sensitization period. Sera were drawn 3 or 4 days after last antigen injection.

d- Antigen challenge dose was 150 μg i.v. for ovomucoid and 6000 pnu i.v. for Ragweed.

TABLE II: 1gG₁ and 1gE antibody titers in "hyposensitized" and control B₆D₂ mice^a

Week Exper	Experi-	ntro	Week of Experi-Control Group	هم.	5 1	Group I		8	Group II		Grou	Group III		ఠ	Group IV	·.
	1861	0 -1	IgE over	Jagi Pag-	1861	(5 µg evomucoid S.C.) gG IgE IgE vo-	IgE Rag-	186.5µg	(0.5µg ovomucoid 1.D.) gG 1gE 1gE ovo 8as-	1gE Rag-	1861	(0.5 Lg ovomicoid S.C) [gG] IgE IgE	IgE Rage	186 ₁	1gE	(0.05µg ovomucoid 1.D.) 1gC 1gE 1gE 1gE
	muc	oldd	mucol	mucoid mucoid weed	mucold	mucoid	weed	mucold	micold	veed	mcold	mucold	weed	mucold	mucold	veed
	35 < 1:20	A CONTRACTOR OF THE PARTY OF TH	1:20	•	1:2560 1:1280	1:1280		1:320	1:320	•	1:640	1:320	•	1:160	1:320	•
~	1:2	> 0	< 1:20 < 1:20	•	1:640	1:320	•	1:640	1:320		1:320	1:160	•	1:80	1:80	
-	1:2	V 0	< 1:20 < 1:20	•	1:160	1:80	•	1:80	1:80	•	1:80	1:80	٠	1:40	1:40	
47 <	< 1:5		< 1:5	•	1:80	1:160	•	1:80	1:160	•	1:80	1:80	•	1:80	1:80	
-	< 1:5	٧	< 1:5	•	1:80	1:160		1:80	1:80	91	1:80	1:80	•	1:80	1:20	•
*	< 1:5		< 1:5 < 1:5	< 1:5		1:80	1:5		1:20	1::5		1:20	1:5		1:20	1:5
-	: 1:5	٧	<1:5 <1:5 <1:5	< 1:5	1:20	> 08:1	< 1:5	1:5	1:20 <	< 1:5	1:20	1:20	< 1:5	1:20	1:20	< 1:5
75	Thi	rd In	Third Immunization	ation												
9/	1:1	09	1:160	1:160 1:160 1:160	1:40	1:40	1:160	1:10	1:10	1:40	1:40	1:20	1:160	1:40	1:40	1:160
80	1:20		1:80	1:80 1:320	1:80	1:40	1:80	1:20	1:20	1:80	1:80	1:80	1:20	1:80	1:80	1:80
88	1:20	0	1:80	1:80 1:40	1:20	1:40	1:10 <	< 1:10	1:10	1:10	1:40	1:40	< 1:10	1:20	1:40	1:10
88	Pour	rth 1	munit	Fourth Immunization												
87	1:3	20	1:640	1:320 1:640 1:320	1:160 1:160	1:160	1:40	1:40	1:40	1:40	1:40	1:40	1:40	1:80	1:40	1:40
1																1

a- Hyposensitization with ovormucoid began at 33rd week of experiment with 5 increments of dosage over a 9 day period - The maximum dose given weekly for four weeks then twice weekly to 64th week of experiment. b- Groups of 7-8 mice each were made from total population whose pooled sera IgG1 and IgE antibody titers were < 1:20 and 1:40 for ovomucoid, 1:40 for Ragueed at week 27 of experiment. c- 1gG, and 1gE titers were obtained by PCA assay in 6-8 week old CFW female mice, 1gG, 2 hour sensitization period; 1gE 72 hour ensitization period. Sera were drawn 3 or 4 days after last antigen injection.

d- Antigen challenge dose was 150 ug 1.v. for ovomucoid and 6000 pmu 1.v. for Ragweed.

TABLE III: Anaphylactic Mortality*

(i) Gayta			Anaphylactic deaths	Average time to death
LAF1 group	s			
Control	.8		4/4	18 min
Group	I	(5 µg S.C.)	3/4	46
Group	II	(0.5 µg I.D.)	1/3	44
Group	III	(0.5 µg S.C.)	2/3	cacten C25 Cer
Group	IV	(0.05 µg I.D.)	3/3	23
6D2F1 gro	ups			
Control	s		4/7	
Group	I		1/4	76 min
Group	II		1/4	
Group	III		0/4	•
Group	IV		1/4 Controllers	43 min

^{*}To 10 μg ovomucoid injected I.V.

12 Copies

Director (ATTN: SGRD-UWZ-AG) Walter Reed Army Institute of Research Walter Reed Army Medical Center Washington, D. C. 20012

4 Copies

HQDA (SGRD-SI) Fort Detrick Frederick, MD 21701

12 Copies

Defense Documentation Center ATTN: DDC-DDA Cameron Station Alexandria, Virginia 22314

1 Сору

Dean
School of Medicine
Uniformed Services University
of the Health Sciences
4301 Jones Bridge Road
Bethesda, Maryland 20014

1 Сору

Superintendent Academy of Health Sciences, US Army ATTN: AHS-COM Fort Sam Houston, Texas 78234